



## CITY OF COLLEGE STATION MUNICIPAL COURT

300 Krenek Tap Rd.

College Station, TX 77842

Phone: (979) 764-3683 Fax Number: (979) 764-3894

**Deferred Adjudication Request Form:** (If you received a minor in possession of alcohol or tobacco citation, you must submit your request in person and are not allowed to use this form.) All other applicants, please fill out and return to court in person or by mail. Upon approval, your citation amount plus \$50 must be paid and your paperwork signed to be officially placed on deferred adjudication.

CAUSE NUMBER: \_\_\_\_\_

OFFENSE: \_\_\_\_\_

NAME: \_\_\_\_\_

CITATION NO. \_\_\_\_\_

### APPLICATION FOR DEFERRED ADJUDICATION

I, the defendant in the above-entitled cause, do hereby enter my plea of No Contest, waive my right to a jury trial and request Deferred Adjudication (Probation) for the Class C Misdemeanor offense of: \_\_\_\_\_. I understand that I can only make this request on or before my appearance date and I must meet all eligibility requirements in order for this request to be granted by the court. I understand that Deferred is a privilege, not a right, offered at the sole discretion of the Court.

I swear that the following statements are true:

1. I waive my right to trial and enter my plea of No Contest.
2. I was not charged with exceeding the posted speed limit in excess of 24 miles per hour, operating a motor vehicle without financial responsibility (if an accident was involved), subsequent charge of no proof of financial responsibility, or subsequent charge involving alcohol.
3. I have not been on Deferred Adjudication for dismissal of an offense within the one (1) year prior to the offense date in this matter.
4. I am not currently on Deferred Adjudication for another offense in any court in the State of Texas.
5. I am providing FULL PAYMENT (which equates to the entire amount of fines/cc plus \$50) along with this request.
6. If the Court grants this request, I understand that I will be placed on probation for a period of time not to exceed six (6) months.
7. If the Court grants this request, I understand that the Court will require that I not be arrested or issued a citation for any similar offense during my probationary period.
8. If the Court grants this request, I understand that the court may impose additional requirements as it deems appropriate during my probationary period (i.e. attend classes, perform community service, submit to counseling, provide documentation, etc.) and, if ordered to do so, I understand that documented

proof of the requirements being met must be filed with the Court in accordance with the terms and conditions set forth in the Order of the Court.

9. If the court grants this request, I understand that I must file a Statement of Compliance within 15 days before the end of my probationary period affirming that I have complied with all the terms and conditions of my probation. If I have successfully complied with my probation, the court will process this matter for DISMISSAL and a CONVICTION WILL NOT BE REPORTED.
10. And finally, if the Court grants this request and I fail to return a Statement of Compliance and/or FAIL TO COMPLY with all the terms and conditions of my probation, I understand that I will have a CONVICTION in this matter and the offense will be reported as required by law.

I, the Defendant, do hereby enter my plea of No Contest and swear or affirm to the statements above.

_____	Sworn to before me, the undersigned
Defendant Signature	authority on this the _____ day of
	_____, 2003.
_____	_____
Complete Mailing Address	Notary Public, State of _____
_____	_____
City, State, Zip	or Municipal Court Clerk
_____	
Phone	

PLEASE NOTE: Failure to properly complete, notarize and mail or hand-deliver this form with your payment on or before your appearance date, will result in your request being denied and Judgement (conviction) being entered against you.